



CERTIFICATE OF MAILING

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"Commissioner for Patents"
P.O. Box 1450
Alexandria, VA 22313-1450

on JANUARY 9, 2004

Milton L. Honig

MILTON L. HONIG
Reg. No. 28,617
Attorney for Applicant(s)

JANUARY 9, 2004

Date of
Signature

J6650(C)
99-0492-HC

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer Number: 000201
Attorney Docket No.: J6650(C)
Applicant: Fan et al.
Serial No.: 10/001,558
Filed: October 24, 2001
FOR: PERSONAL CLEANSING COMPOSITIONS THAT CONTAIN
SURFACTANTS, CO-SURFACTANTS, WATER INSOLUBLE SOLIDS
AND/OR LIQUIDS AND CATIONIC CONDITIONING POLYMERS
UNUS No.: 99-0492-HC

Group: 1617
Examiner: Mojdeh Bahar

Edgewater, New Jersey 07020
January 9, 2004

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated October 21, 2003, please amend the above-identified patent application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.

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UNITED STATES DEPT. OF COMMERCE
Patent and Trademark Office

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Customer Number: 000201
Attorney Docket Number: J6650(C)
Applicant: Fan et al.
Serial No.: 10/001,558
Filed: October 24, 2001
For:

PERSONAL CLEANSING COMPOSITIONS THAT CONTAIN SURFACTANTS, CO-SURFACTANTS, WATER INSOLUBLE SOLIDS AND/OR LIQUIDS AND CATIONIC CONDITIONING POLYMERS

UNUS No.: 99-0492-HC

Group: 1617
Examiner: Mojdeh Bahar

Edgewater, New Jersey 07020
January 9, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified application.

[X] No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED

	(2) * Claims Remaining After Amendment		(4) ** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims		Minus			\$ 18.00	
Independent Claims		Minus			\$ 84.00	
Multiple Claims					\$ 280.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$

*If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

**If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.

[] Charge \$_____ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under

[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17;

[X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

MLH/sm
(201) 840-2403

Milton L. Honig
Attorney of Record
Reg. #28,617